

UNITED STATES BANKRUPTCY COURT  
FOR THE EASTERN DISTRICT OF MICHIGAN

**COVER SHEET FOR AMENDMENTS**

CASE NAME        **Niculae Alexandru Pinte**  
                      **Maria Pinte**

CASE NUMBER    **07-42262-mbm**

The enclosed documents amend the petition, schedule, statement of financial affairs, statement of income and expenses, matrix or summary of assets and liabilities.

The purpose of this amendment is to:

- ☐    ADD CREDITORS TO SCHEDULE(S) \_\_\_\_\_. HOW MANY?\_\_ (USE SECOND PAGE OF THIS FORM TO LIST CREDITORS ADDED).
- ☐    CORRECT THE ADDRESSES OF CREDITORS ALREADY LISTED ON THE SCHEDULES AND MATRIX PREVIOUSLY FILED. (USE SECOND PAGE OF THIS FORM).
- ☒    OTHER (Please explain) **Amended Schedule J**

**I declare under the penalty of perjury that the attached sheet is true and accurate.**

**/s/ Niculae Alexandru Pinte**  
**Niculae Alexandru Pinte**  
Debtor's Signature

**/s/ Maria Pinte**  
**Maria Pinte**  
Joint Debtor's Signature

Signed: **/s/ Morris B. Lefkowitz**  
**Morris B. Lefkowitz P31335**  
**24100 Southfield Road, Suite 203**  
**Southfield, MI 48075**  
**(248) 559-0180**  
**MBL44@aol**

In re **Niculae Alexandru Pintea**  
**Maria Pintea**Case No. **07-42262**

Debtor(s)

**SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) -  
AMENDED**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)		\$	<b>0.00</b>
a. Are real estate taxes included?	Yes <u>    </u> No <u><b>X</b></u>		
b. Is property insurance included?	Yes <u>    </u> No <u><b>X</b></u>		
2. Utilities:		\$	<b>200.00</b>
a. Electricity and heating fuel		\$	<b>36.70</b>
b. Water and sewer		\$	<b>75.00</b>
c. Telephone		\$	<b>50.00</b>
d. Other <b>Cell Phone</b>		\$	<b>40.00</b>
3. Home maintenance (repairs and upkeep)		\$	<b>500.00</b>
4. Food		\$	<b>50.00</b>
5. Clothing		\$	<b>0.00</b>
6. Laundry and dry cleaning		\$	<b>50.00</b>
7. Medical and dental expenses		\$	<b>180.00</b>
8. Transportation (not including car payments)		\$	<b>0.00</b>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	<b>0.00</b>
10. Charitable contributions		\$	<b>0.00</b>
11. Insurance (not deducted from wages or included in home mortgage payments)		\$	<b>58.00</b>
a. Homeowner's or renter's		\$	<b>0.00</b>
b. Life		\$	<b>0.00</b>
c. Health		\$	<b>101.89</b>
d. Auto		\$	<b>0.00</b>
e. Other		\$	
12. Taxes (not deducted from wages or included in home mortgage payments)		\$	<b>318.00</b>
(Specify) <b>City Taxes</b>			
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		\$	<b>0.00</b>
a. Auto		\$	<b>0.00</b>
b. Other		\$	<b>0.00</b>
c. Other		\$	<b>0.00</b>
d. Other		\$	<b>0.00</b>
14. Alimony, maintenance, and support paid to others		\$	<b>0.00</b>
15. Payments for support of additional dependents not living at your home		\$	<b>0.00</b>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	<b>25.00</b>
17. Other <b>misc</b>		\$	<b>0.00</b>
Other		\$	

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$	<b>1,684.59</b>
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19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

**20. STATEMENT OF MONTHLY NET INCOME**

a. Average monthly income from Line 15 of Schedule I	\$	<b>4,028.87</b>
b. Average monthly expenses from Line 18 above	\$	<b>1,684.59</b>
c. Monthly net income (a. minus b.)	\$	<b>2,344.28</b>